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CONFIRMATION NO. 2654

<b>SERIAL NUMBER</b> 09/910,429	<b>FILING OR 371(c) DATE</b> 07/20/2001 <b>RULE</b>	<b>CLASS</b> 713	<b>GROUP ART UNIT</b> 2131	<b>ATTORNEY DOCKET NO.</b> Bell-32
<b>APPLICANTS</b> Robert T. Baum, Gaithersburg, MD;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 09/652,822 08/31/2000 ABN and is a CIP of 09/652,750 08/31/2000 and is a CIP of 09/652,095 08/31/2000 and is a CIP of 09/834,573 04/12/2001 * (*)Data provided by applicant is not consistent with PTO records.				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 09/03/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MD	<b>SHEETS DRAWING</b> 23	<b>TOTAL CLAIMS</b> 36
				<b>INDEPENDENT CLAIMS</b> 5
<b>ADDRESS</b> STRAUB & POKOTYLO 620 Tinton Avenue Bldg. B, 2nd Floor Tinton Falls ,NJ 07724-3260				
<b>TITLE</b> Security extensions using at least a portion of layer 2 information or bits in the place of layer 2 information				
<b>FILING FEE RECEIVED</b> 1326	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	